1338728

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U3C
June 2015
**Form must be Typed**
**Form must be completed on a per well basis**

# ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

***Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.***

OPERATOR: License # 33360
Name: C & H Energy LLC
Address 1: PO BOX 71
Address 2:
City: BLUE MOUND State: KS Zip: 66010 + __ __ __ __
Contact Person: Shannon Harrison
Phone: ( 620 ) 363-2895
Lease Name: KAYCEE
Well Number: 7

API No.: 15-011-22312-00-01
Permit No: E26986.3
Reporting Year: 2016
*(January 1 to December 31)*

SW - NE - NW - SW Sec. 4 Twp. 24 S. R. 22 ☑ E ☐ W
*(Q/Q/Q/Q)*
2085 feet from ☐ N / ☑ S Line of Section
4515 feet from ☑ E / ☐ W Line of Section
County: Bourbon

**I. Injection Fluid:**

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: _____ mg/l Specific Gravity: _____ Additives: _____
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 600 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 50 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: _____ *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 6 | 600 | 0 | | 12 |
| February | 6 | 600 | 0 | | 12 |
| March | 6 | 600 | 0 | | 12 |
| April | 6 | 600 | 0 | | 12 |
| May | 6 | 600 | 0 | | 12 |
| June | 6 | 600 | 0 | | 12 |
| July | 6 | 600 | 0 | | 12 |
| August | 6 | 600 | 0 | | 12 |
| September | 3 | 600 | 0 | | 12 |
| October | 3 | 600 | 0 | | 12 |
| November | 3 | 600 | 0 | | 12 |
| December | 3 | 600 | 0 | | 12 |
| ***TOTAL*** | 60 | | 0 | | |

Submitted Electronically